O.H. CLOSE YOUTH CORRECTIONAL FACILITY



Prepared by:

California Department of Corrections and Rehabilitation Office of Audits and Compliance

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Division of Juvenile Justice, Safety and Welfare Remedial Plan: Youth Grievance Temporary Departmental Order 07-92, Special Master Reports, and the Court Appointed Experts Reports.

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EXECUTIVE SUMMARY

The Office of Audits and Compliance, Compliance/Peer Review Branch (CPRB) reviewed O.H. Close Youth Correctional Facility's (OHCYCF) Youth Grievance Temporary Departmental Order (TDO) 07-92 and the Safety and Welfare Remedial Plan, Section 8.5 (Grievances) to determine whether OHCYCF is in compliance with the grievance policies and identified areas outlined in the Safety and Welfare Remedial Plan.

The review of the Safety and Welfare Remedial Plan was conducted during the period of June 15 through June 19, 2009. During this period, the CPRB reviewed electronic mail and memorandum correspondence, Ward Information Network (WIN) documentation, time frames, corrective action, training records, and monthly grievance reports submitted to the Division of Juvenile Justice (DJJ) Central Office by the facilities.

The CPRB review team concludes that OHCYCF is in substantial compliance (SC) with grievances outlined in the Safety and Welfare Remedial Plan, Section 8.5, Items 1, 2, 3, 4, 5a, 5c, 6, 7a, 7b, 9, and 11a.

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BACKGROUND

On November 19, 2004, a Consent Decree was entered in the case of *Farrell v. Allen*. The Consent Decree required the defendant, now the DJJ, to file Remedial Plans in all areas of deficiency identified by the Court appointed experts by January 31, 2005. In January 2005, in response to the Consent Decree, DJJ made the decision to reform California's juvenile system into a rehabilitative model based on a therapeutic environment.

The DJJ has established a Farrell Task Force Team to develop, implement, and measure compliance within the scope of the six Remedial Plans. As part of the Farrell Task Force, the CPRB is charged with assessing compliance and if applicable, recommending corrective actions related to the findings.

The CPRB will be reviewing specific action items that make up the six Remedial Plans. The action items that have been selected for review are based on risk to the Department. These issues include, but are not limited to, 18 items with a time sensitive date and key indicators. The review will be evaluated using a compliance rating system. Each action item will be evaluated by whether it is in substantial compliance (SC) 85 percent and above, partial compliance (PC) 84 percent to 50 percent and noncompliance (NC) 49 percent and below. Items that result in a yes or no compliance level will be rated as SC or NC. Items that cannot be rated will be categorized as not ratable (NR). Due to the diversity and occasional abstract content of the action items, a numeric rating system cannot always be utilized. As a result, a narrative rating system will be used to evaluate the level of compliance.

The specific objective of the review is to:

 Verify whether OHCYCF is in SC with grievances, as outlined in the Safety and Welfare Remedial plan.

The CPRB determined whether the objectives are met by reviewing:

- Safety and Welfare Remedial Plan;
- Audit reports prepared by Court appointed experts;
- Audit reports prepared by the Special Master;
- Policies and TDOs;
- Correspondence between Central Office and Facilities (electronic mail, memorandums, corrective action plans, etc);

- Monthly grievance and trend reports;
- Staff training records; and
- Information obtained through staff and youth interviews.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
151	8.5	1	Action Item: Forms available without assistance in all units. Methodology: The CPRB visited all seven living units. Reviewed the grievance folders: Grievances, Staff Misconduct, and Emergency Grievances. Interviewed living unit staff, youth, and the Grievance Clerks. Criteria: TDO 07-92, page 6. Safety and Welfare Remedial Plan, July 10, 2006, page 71.	X				

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
			Action Item:					Grievance lock boxes have been on the OHCYCF living units since April 2007.
			Lock box for grievances in all living units.					
			Methodology:					
			The CPRB visited all seven living units.					
152	8.5	2	Viewed grievance lock boxes on all living units.	X				
			Interviewed living unit staff, youth, and the Grievance Clerks.					
			Criteria:					
			TDO 07-92, page 6.					
			Safety and Welfare Remedial Plan, July 10, 2006, page 71.					

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
			Action Item:					
			Grievance clerk ensures adequate supply of forms; educates/assists in process.					
			Methodology:					
			The CPRB visited all seven living units.					
153	8.5	3	Reviewed the grievance folders: Grievances, Staff Misconduct, and Emergency Grievances.	X				
			Collected the Youth Grievance Clerk duty statement.					
			Interviewed living unit staff, youth, and Grievance Clerks.					
			Criteria:					
			TDO 07-92, page 10.					
			Safety and Welfare Remedial Plan, July 10, 2006, page 71.					

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
154	8.5	4	Action Item: Notice of receipt of grievance or allegation of misconduct. Methodology: Interviewed Facility Grievance Coordinator. Collected notices of receipts for grievances and allegations of staff misconduct.	X				The notice of receipt process for grievances or allegations of staff misconduct is the responsibility of the Facility Grievance Coordinator. The notice of receipt is generated by the WIN system.
			Criteria: TDO 07-92, page 12.					
			Safety and Welfare Remedial Plan, July 10, 2006, page 71.					

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
155	8.5	5a	Action Items: Facility Grievance Coordinator prepares monthly reports. Methodology: Interviewed Facility Grievance Coordinator. Reviewed monthly reports submitted by facilities to Central Office and collected reports as proof of practice (March, April, and May 2009).	X				Each facility has one or more Grievance Coordinators who are required to prepare monthly reports on grievances and grievance trends for use by the Superintendent and his/her management team. The Facility Grievance Coordinator is responsible for sending monthly reports to Central Office. These reports contain the monthly total of OHCYCF's staff misconduct, grievances, and trends.
			Criteria:					
			TDO 07-92, page 43.					
			Safety and Welfare Remedial Plan, July 10, 2006, page 71.					

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
156	8.5	5b	Action Item: Design of grievance reports developed with the Court appointed expert. Criteria: Policy not required.				X	Not Ratable - This is a Central Office function.
157	8.5	5c	Action Item: Superintendent reviews all allegations of staff misconduct. Methodology: Interviewed Facility Grievance Coordinator. Collected copies of the Superintendent's "Staff Misconduct Complaint Review" forms with the Superintendent's signature. Criteria: Policy not required.	X				Once the Superintendent reviews an allegation of staff misconduct, a copy of the inquiry report is sent to the Directors office and a hard copy is placed in a designated facility file. The Directors office makes the final decision on alleged staff misconduct inquiries.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
158	8.5	6	Action Item: Process developed to address abuse of grievance system. Methodology: Interviewed Facility Grievance Coordinator. Collected notices that the WIN system generates to track abuse of the grievance system by youths. Criteria: TDO 07-92, page 7. Safety and Welfare Remedial Plan, July 10, 2006, page 71.	X				Any recorded abuse of the grievance system generates a notice through the WIN system. The notice identifies the abuse and any restriction. At this time, OHCYCF has no recorded abuse of the grievance system. Additionally, the Wards with Disabilities Coordinator, Grievance Coordinator, and the staff assistants are available to assist youths with disabilities to understand the grievance system and the process needed to file grievances.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
159	8.5	7a	Action Item: Weekly and monthly monitoring reports automated. Methodology: Interviewed Facility Grievance Coordinator. Collected reports that the WIN system generates. Reviewed scanned copies that track all grievances and complaints alleging staff misconduct. Criteria: TDO 07-92, pages 42 and 44. Safety and Welfare Remedial Plan, July 10, 2006, page 71.	X				DJJ has developed an automated grievance tracking system. Facilities scan, track, and monitor all grievances and complaints alleging staff misconduct, as well as, compiling data to present to local management. Central Office has developed queries for the WIN system that help facility grievance coordinators monitor grievances, collect data, and complete their monthly reports.

	Section	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
160	8.5	7b	Action Item: Intervention strategies developed in response to trends. Methodology: Interviewed Facility Grievance Coordinator. Reviewed and collected electronic mail and memorandum correspondence discussing trends between OHCYCF and Central Office. Reviewed the standardized trend reporting form and collected scanned copies of grievances, emergency grievances, and alleged staff misconduct grievances. Criteria: TDO 07-92, page 43. Safety and Welfare Remedial Plan, July 10, 2006, page 71.	X				The facility scans, tracks, and monitors allegations of staff misconduct. Central Office has the ability to monitor all grievances and complaints alleging staff misconduct through the WIN system. Facility Grievance Coordinators monitor grievances and discuss trends with facility management and Central Office in their monthly reports.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
161	8.5	8a	Action Items: Central Office review of grievance response/timeframes. Criteria: TDO 07-92, page 44. Safety and Welfare Remedial Plan, July 10, 2006, page 72.				X	Not Ratable - This is a Central Office function.
162	8.5	8b	Action Item: Central Office collection and evaluation of grievance data. Criteria: TDO 07-92, page 44. Safety and Welfare Remedial Plan, July 10, 2006, page 72.				X	Not Ratable - This is a Central Office function.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
163	8.5	8c	Action Item: Central Office assistance in corrective action plans. Criteria: Policy not required. Safety and Welfare Remedial Plan, July 10, 2006, page 72.				X	Not Ratable - This is a Central Office function.
164	8.5	9	Action Item: Standard duty statement for grievance coordinator. Methodology: Interviewed DJJ staff. Collected duty statements for the Facility Grievance Coordinator. The duty statement listed the responsibilities and requirements of the position. Criteria: Procedure not policy.	X				Central Office provided the Division Grievance Coordinator's duty statement and the Facility Grievance Coordinator's duty statements; listing the responsibilities and requirements of the positions.

DJJ #	Section #	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
166	8.5	11a	Action Item: All direct care staff trained in grievance system. Methodology: Interviewed Facility Grievance Coordinator. Reviewed and collected grievance inservice training rosters, living unit training sign-in sheets, and Facility Grievance Coordinator training records. Criteria: TDO 07-92, page 45. Safety and Welfare Remedial Plan, July 10, 2006, page 72.	X				DJJ provided training to all Central Office direct care staff and facility staff. The Facility Grievance Coordinators were provided "Training for Trainers," and in turn, provided all facility staff training on the grievance system during the annual block training.

	Section	Item	Action Items & Reviewing Method	SC	PC	NC	NR	Reviewers Comments
#	#		Action Home					Not Detable This is a Control
			Action Item: Grievance coordinators trained for duties.					Not Ratable - This is a Central Office function.
			Criteria:					
167	8.5	11b	TDO 07-92, page 45.				Χ	
			Safety and Welfare Remedial Plan, July 10, 2006, page 72.					

Review of the Safety and Welfare Remedial Plan O.H. CLOSE YOUTH CORRECTIONAL FACILITY <u>GLOSSARY</u>

CPRB	Compliance/Peer Review Branch
DJJ	Division of Juvenile Justice
OHCYCF	O.H. Close Youth Correctional Facility
NC	Noncompliance
NR	Not Ratable
PC	Partial Compliance
SC	Substantial Compliance
TDO	Temporary Departmental Order
WIN	Ward Information Network